

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: ST. MARY'S COLLEGE OF MARYLAND

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 18952 E. FISHER ROAD
ST. MARY'S CITY, MD 20686

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** NORMAN UMBERGER

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

ST. MARY'S COLLEGE OF MARYLAND
18952 E. FISHER ROAD, ST. MARY'S CITY, MD 20686

Telephone Number of Designated Agent: 301-862-0198

Facsimile Number of Designated Agent: 301-862-0281

Email Address of Designated Agent: numberger@smc

Signature of Officer or Representative of the Designating Service Provider:

Date: 3/1/01

Typed or Printed Name and Title: TODD D. KELLEY
ASSOCIATE PROVOST FOR INFORMATION SERVICES

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

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